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## DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)

□ Declaration Submitted OR with Initial Filing.

☑ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number		01-1327	
First Named Inventor		Gideon Eden	
COMPLI	ETE II	KNOWN	
Application Number		09 / 992,561	
Filing Date	<del>*************************************</del>	**********	
Group Art Unit	1635		
Examiner Name	<del></del>		

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My residence, post office ad					
I believe I am the original, fir names are listed below) of ti	st and sole inventor (If one subject matter which	only one name is listed below is claimed and for which a	w) or an original Datent is sought	, first and joint inve on the invention en	ntor (if plural :
DETECTING AIRBO					
the specification of which	77	711 £ 11 1 11 3	· · · · · · · · · · · · · · · · · · ·		
is attached hereto	(1)	Title of the Invention)	· .		
OR CVI	<u> </u>	Day, Allere	•		
₩ was filed on (MM/DD/	(YYY) III/16/20(	01 as Unit	ed States Applic	ation Number or Po	CT International
Application Number 09/99	2.561 and				7
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I hereby state that I have revie amended by any amendment s	pecifically referred to al	contents of the above ider bove.	ntified specification	on, including the cla	aims, as
I acknowledge the duty to discl			1.0 . (1.07.0)		
		, material to paramaumy as	detined in 37 G	FR 1.56.	
hereby claim foreign priority be certificate, or 365(a) of any PC America, listed below and have a or of any PCT international applications.	Ilso identified below by	an union positivated at 165	ist one country	other than the Uni	ited States of interest in its certificate.
Prior Foreign Application	AND REAL PROPERTY AND PROPERTY AND PERSONS ASSESSMENT AND PROPERTY AND ADDRESS.				
11 11 11 1		Foreign Filing Date	Priority	Certified Copy	
Number(s)	Country	Foreign Filling Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy YES	
Number(s)	Country		1 - 1		/ Attached?
Number(s)  Additional foreign application	numbers are listed on a	(MM/DD/YYYY)	Not Claimed	YES	Attached? NO
Number(s)  Additional foreign application	numbers are listed on a	(MM/DD/YYYY)	Not Claimed	YES	Attached? NO
Number(s)  Additional foreign application libereby claim the benefit under Application Number(s)	numbers are listed on a 35 U.S.C. 119(e) of any	supplemental priority data and United States provisional and	Not Claimed	YES	Attached? NO
Number(s)  Additional foreign application I hereby claim the benefit under	numbers are listed on a 35 U.S.C. 119(e) of any	(MM/DD/YYYY)	sheet PTO/SB/0.  application(s) list  numbe supple	YES	pplication ata sheet

[Page 1.of 2] Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the Individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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DECLARATION -	Utility or	Design	Patent A	pplication
			The second second second	A STATE OF THE PERSON NAMED IN COLUMN TWO IS NOT THE OWNER.

I herapy claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(o) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the menner provided by the first paragraph of 35 U.S.C. 112. I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application, and the national or PCT international filing date of this application. Parent Patent Number U.S. Parent Application or PCT Parent Parent Filing Date (if applicable) (MM/DD/YYYY) Number Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/C2S siteched hereio. As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent Place Customer and Trademerk Office connected therewith: Customer Number Number Bar Code Label hane Registered practitioner(s) name/registration number listed below Registration Registration Number Name Ame Number 25504 James M. Deimen Additional registered precilitarer(s) named on supplemental Registered Frequency Information thest PTO/58/02C attached hereto. OR XX Correspondence address below Direct all correspondence to: Customer Number or Bar Code Label James M. Deimen Name 320 N. Main Street, Suite 300 Address Address 48104-1192 MI ZIP Ann Arbor State City Fex | 734-769-2702 734-994-5947 USA Telephone Country hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are curishable by fine or imprisonment, or both, under 18 U.S.C. 100's and that such willful take statements may jeopardize the validity of the application or any patent issued thereon. A petition has been filed for this unsigned inventor Name of Sole or First Inventor: Family Name or Sumama Given Name (first and middle (if any)) Eden Gideon 3/29/02 G. Edmi inventor's Date Signature USA MI USA Ann Arbor Citizanship Residence: City State Country 2765 Ember Way Post Office Address Post Office Address USA 48104 Arbor Ann MI Country ZIP Statel City supplemental Additional inventor(s) sheet(s) PTO/68/02A sitsoned hereto

[Page 2 of 2]



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Additional inventors are being named on the

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